4. 510k Summary

This summary of safety and effectiveness is submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.87.

Establishment Registration Number:

2021898

Address of Manufacturer:

Medtronic Neurosurgery 125 Cremona Drive Goleta CA, 93117 (805) 968-1546 ext. 1773 Fax: (805) 968-9336

Contact Person:

Jeffrey Henderson

Date:

August 11, 2004

Trade or Proprietary Name:

Medtronic PS Medical® Neurosurgical implants

Common usual or Classification Name:

Central Nervous System Flow Control Shunts and

Accessories (882.5550)

Predicate Device Identification:

PS Medical® Neurosurgical implants (K803257, K831678, K841442, K833822, K873247, K874468, K874498, K900676, K902783, K911410, K913412, K934545, K951258, K991502, K012052, K033850.)

<u>Description</u>: The PS Medical Neurosurgical Implants are manufactured with silicone adhesive. The devices are used as shunt components.

Intended Use: CSF Shunt components are designed to provide controlled Cerebrospinal Fluid (CSF) flow from the ventricles of the brain to the right atrium of the heart or the peritoneal cavity.

Intended Use of predicate device(s): CSF Shunt components are designed to provide controlled Cerebrospinal Fluid (CSF) flow from the ventricles of the brain to the right atrium of the heart or the peritoneal cavity.

<u>Technological comparison:</u> Medtronic Neurosurgery submits that the materials of fabrication, intended use, performance characteristics and design specifications of the CSF-Flow Control Shunt components are equivalent to the previously reviewed and cleared products. Based upon the summary above, Medtronic Neurosurgery determines substantial equivalence, safety, and efficacy of the products based upon the predicate and currently marketed devices.





SEP 2 4 2004

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Jeffrey Henderson Vice President, Quality and Regulatory Affairs Medtronic Neurosurgery 125 Cremona Drive Goleta, California 93117

Re: K042198

Trade/Device Name: Medtronic Neurosurgical Implants

Regulation Number: 21 CFR 882.5550

Regulation Name: Central nervous system fluid shunt and components.

Regulatory Class: II Product Code: JXG Dated: August 11, 2004 Received: August 27, 2004

Dear Mr. Henderson:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

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This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4659. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Miriam C. Provost Celia M. Witten, Ph.D., M.D.

Director

Division of General, Restorative and Neurological Devices

Office of Device Evaluation

Center for Devices and Radiological Health

Enclosure

510(k) Number (if known): K042	198	
Device Name: Medtronic Neurosurgical in	nplants	
Indications For Use:		
CSF Shunt components are designed to present to the ventricles of the brain to the right atrium of	provide controlled Cer of the heart or the perit	ebrospinal Fluid (CSF) flow from the oneal cavity.
Prescription Use X (Part 21 CFR 801 Subpart D)	AND/OR	Over-The-Counter Use (21 CFR 807 Subpart C)
(PLEASE DO NOT WRITE BELOW	THIS LINE-CONTINU	JE ON ANOTHER PAGE (F NEEDED)
Concurrence of C	DRH, Office of Device	e Evaluation (ODE)

Page 1 of __1__

Miriam C Provot

(Division Sign-Off)

Division of General, Restorative, and Neurological Devices

510(k) Number <u>K042198</u>